15915 U.S.PTO
100703

CONTINUATION/DIVISIONAL APPLICATION TRANSMITTAL

(Rule 53(b) Continuation or Divisional) ☐ DUPLICATE

Address to: **Commissioner of Patents** **P.O. Box 1450** **Alexandria, VA 22313-1450**	Attorney Docket No.: CHEN3358D/BEU First Named Inventor: Chiu-Hao CHENG Total Pages: 16

This requests a ☐ Continuation or ☒ Divisional application under 37 CFR 1.53(b) of prior application:

Appl. No.:	10/107,458	Group Art Unit:	3713
Filed on:	March 28, 2002	Examiner:	K. Nguyen
Entitled:	CONTROL DEVICE OF COMBINATORIAL KEY OPERATIONS		

22581 U.S.PTO
10/679350
100703

☒ 1. The entire disclosure of the pending, prior application is hereby incorporated by reference.

☒ 2. Submitted herewith is a copy of the complete prior application as filed.

☐ 3. This application is filed by fewer than all the inventors named in the prior nonprovisional application, 37 CFR 1.53(b)(1). **DELETE** the following inventor(s): _____.

☒ 4. Submitted herewith is a copy of the signed Oath/Declaration from the prior application.

☒ 5. Small entity status is claimed.

☐ 6. A _____ month Petition for Extension of Time is filed concurrently in the prior application.

☐ 7. The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17 to Deposit Account No. 02-0200.

☒ 8. A check in the amount of $385.00 is submitted herewith.

☐ 9. Insert before the first sentence of the specification: - - This application is a ☐ Continuation ☒ Division of nonprovisional application serial number 10/107,458 filed 3/28/02 . - -

☐ 10. Cancel in this application original claims _____ of the prior application before calculating the filing fee. At least one independent claim is retained.

☒ 11. The prior application is assigned of record to: **Zeroplus Technology Co., Ltd.**.

☐ 12. Priority is claimed based on each foreign application so listed in the Oath/Declaration and a certified copy of each was filed in U.S. application number _____ filed _____.

☒ 13. A Preliminary Amendment is enclosed.

☐ 14. Submitted herewith is an Application Data Sheet.

☐ 15. Other: _____.

THE FILING FEE IS CALCULATED AS FOLLOWS:				Basic Fee:	$770.00
Total Claims:	4	- 20 =	0	X $18 =	
Independent Claims:	2	- 3 =	0	X $43 =	
23364 Customer Number				Multiple Dependent Claim ($290.00):	
				Subtotal:	$770.00
				50% Reduction if Small Entity Status:	$385.00
Phone: 703-683-0500		Fax: 703-683-1080		Total:	$385.00

Date:	Name:	Signature:	Reg. No.
October 7, 2003	Benjamin E. Urcia		33,805